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 ** CONTINUING DATA ***** *none* *****

 ** FOREIGN APPLICATIONS ***** *none* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KY	SHEETS DRAWING 5	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				
Verified and Acknowledged				

ADDRESS

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TITLE

Automatic media alignment nip release mechanism

FILING FEE RECEIVED 874	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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